## Case 17-07683 Doc 1 Filed 03/13/17 Entered 03/13/17 10:44:51 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on government-issued ure identification (for nple, your driver's see or passport).	Sheri First name  R. Middle name  Temple Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
	mee	ting with the trustee.	(2,72,7,7)	
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-2888	

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Case number (if known)

Debtor 1 Sheri R. Temple

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 3906 212th PI Matteson, IL 60443 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Sheri R. Temple

ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice</i> of page 1 and check the		11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ptcy
	choosing to file under		Chapter 7					
			Chapter 11					
			Chapter 12					
		<b>■</b> c	Chapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are pay	ing the fee yo	k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	money
					stallments. If you choots (Official Form 103A		on, sign and attach the Application for Individuals to	o Pay
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do and you are unable to	so only if you pay the fee in	n only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty n installments). If you choose this option, you must	line that
			the Application	on to Have the	Chapter 7 Filing Fee	Waived (Office	ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ N	0.					
	last 8 years?	□ Y	es.					
			District		Whe	en	Case number	
			District		Whe	en	Case number	
			District		Whe	en	Case number	
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is	— .\						
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor				Relationship to you	
			District		Whe	en	Case number, if known	
			Debtor				Relationship to you	
			District		Whe	en	Case number, if known	
11.	Do you rent your	■ N	Go to I	ine 12.				
	residence?	_		ur landlord ob	tained an eviction jude	nment agains	t you and do you want to stay in your residence?	
		□ Y			•	giii <del>c</del> iii ayaiiis	t you and do you want to stay in your residence?	
				No. Go to line		t on Eviation	hidemont Assist Vou (Farm 404A) and Elevinor	th:a
				bankruptcy pe		t an Eviction .	Judgment Against You (Form 101A) and file it with	THIS

Case 17-07683 Doc 1 Filed 03/13/17 Entered 03/13/17 10:44:51 Desc Main Document Page 4 of 67 Case number (if known) Debtor 1 Sheri R. Temple Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No.

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Sheri R. Temple

Case number (if known)

Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 67 Case number (if known) Debtor 1 Sheri R. Temple **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheri R. Temple Signature of Debtor 2 Sheri R. Temple Signature of Debtor 1 Executed on February 28, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Sheri R. Temple Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Andrew	C. Marzan ARDC	Date	February 28, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Andrew C.	Marzan ARDC		
Ledford, V	/u & Borges, LLC		
Firm name			
105 W. Ma	dison		
23rd Floor			
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
#6316313			
Bar number & St	ate		

		Docum	ent Page 8 of 6	/	_
Fill in this inform	nation to identify your	case:			
Debtor 1	Sheri R. Temple				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					☐ Check if this is an
					amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	95,519.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,264.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	113,783.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	125,216.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,100.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,643.49
	Your total liabilities	\$	153,959.49
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,431.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,649.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Sheri R. Temple

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,197.07 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	laim
From Fait 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,100.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,966.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	11,066.00

	Ca	se 17-07683	B Doc 1		03/13 :umen		17 10:44:51	Desc	: Main
Fill in	this inforn	nation to identify	your case and th			Paue IV 01 67			
Debto		Sheri R. Tem			<u>′</u>				
Debic	ו וכ	First Name	<u> </u>	e Name		Last Name			
Debto									
(Spouse	e, if filing)	First Name	Middle	Name		Last Name			
Unite	d States Bai	nkruptcy Court for	the: NORTHER	N DIST	RICT OF	ILLINOIS			
Case	number _								Check if this is an
									amended filing
Scl n each hink it	hedule n category, se t fits best. Be	e as complete and a e space is needed, a	coperty escribe items. List	le. If two	married	e. If an asset fits in more than on people are filing together, both are On the top of any additional page:	e equally responsible	e for supp	lying correct
	_				<b></b>				
Part 1		•				ou Own or Have an Interest In			
. Do y	you own or h	ave any legal or eq	uitable interest in a	ıny resid	lence, bui	ilding, land, or similar property?			
□ 1	No. Go to Part	2.							
1.1	3906 212tl	, DI		What	-	operty? Check all that apply			
_		if available, or other desc	cription		_	amily home			s or exemptions. Put aims on Schedule D:
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-	or multi-unit building ninium or cooperative			Secured by Property.
	Mattagan		CO 442 0000			ctured or mobile home	Current value of		Current value of the
_	Matteson	IL State	60443-0000				entire property?	-	sortion you own? \$95,519.00
,	City	State	ZIP Code	H	Timesha	ent property	φ <del>9</del> 5,51	9.00	φ35,513.00
				_	Other	Debtor's Residence			ownership interest by by the entireties, or
				Who	has an in	terest in the property? Check one	a life estate), if k	' '	y by the enthenes, or
					Debtor 1	1 only			
(	Cook				Debtor 2	2 only			
(	County				Debtor '	1 and Debtor 2 only	Check if this	is commi	inity property
					At least	one of the debtors and another	(see instruction		mity property
						tion you wish to add about this ite ification number:	m, such as local		
2 1	dd the doll:	ar value of the po	rtion vou own fo	r all of	vour ent	ries from Part 1, including any	v entries for		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$95,519.00

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Case number (if known) Document Debtor 1 Sheri R. Temple 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Malibu Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 60,000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$11,675.00 \$11,675.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,675.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Misc used household goods and furnishings, including: Sofa, Loveseat, TVCR, Coffee Table, End Tables, Dining Table/Chairs, Refrigerator/Freezer, Stove, Microwave, Washer/Dryer, Pots/Pans, Dishes/Flatware, 2 Bedroom Sets, 3 Lamps, Telephone, \$800.00 Lawnmower, Snow Blower, Misc. Tools 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 3 Television, Computer, Printer, Video-Game System, and 2 \$600.00 **Smartphones** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Official Form 106A/B Schedule A/B: Property

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Deptor I	Sheri R. Temple Case number (if kno	wn)
10. Firea	rms	
Exar	mples: Pistols, rifles, shotguns, ammunition, and related equipment	
■ No	s. Describe	
11. Cloth Exar	nes  nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
□ No		
■ Yes	s. Describe	
	Necessary Wearing Apparel	\$700.00
40 10	da.	
12. <b>Jewe</b> <i>Exar</i>	<b>npl</b> es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem	ıs, gold, silver
□ No		
■ Yes	s. Describe	
	Various Costume Jewelry	\$150.00
-		
-	farm animals	
□ No	mples: Dogs, cats, birds, horses	
■ Yes	s. Describe	
	Dog	\$100.00
	Dog	
■ No	other personal and household items you did not already list, including any health aids you did not lis s. Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$2,350.00
Part 4:	Describe Your Financial Assets	
	own or have any legal or equitable interest in any of the following?	Current value of the
		portion you own? Do not deduct secured claims or exemptions.
☐ No	nples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your p	etition
	Cash	\$5.00
	CdSII	<del></del>
	posits of money mples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokera institutions. If you have multiple accounts with the same institution, list each.	ge houses, and other similar
□ No	Institution name:	
■ Yes	s	
	17.1. Checking United Credit Union	\$1,600.00
	17.2. Savings United Credit Union	\$25.00

Official Form 106A/B

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Case number (if known) Document Debtor 1 Sheri R. Temple 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) 401K Provided by Alliance \$1,304.00 **IRA Roth with Alliance** \$1.305.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ No

Yes. Give specific information about them...

State of Illinois Occupational Therapy License

\$0.00

Debtor 1	Case 17-07683  Sheri R. Temple	Doc 1	Filed 03/13/17 Document	Entered 03/13/17 10:44:51 Page 14 of 67 Case number (if known)	Desc Main
					Do not deduct secured claims or exemptions.
■ No	funds owed to you  Give specific information ab	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
■ No			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
Exam <sub>i</sub> ■ No	amounts someone owes y ples: Unpaid wages, disabilibenefits; unpaid loans Give specific information	ty insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	sts in insurance policies ples: Health, disability, or life	insurance; I	nealth savings account (	HSA); credit, homeowner's, or renter's insurar	nce
= : : :	Name the insurance compa Com	iny of each p pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			rance Policy through Cash Surrender Val		\$0.00
00. A		ue you from	someone who has die		-:
If you some o		g trust, expe	x proceeds from a life in	surance policy, or are currently entitled to rec	eive property because
If you some of No □ Yes.  33. Claims  Examp	are the beneficiary of a living one has died.  Give specific information	ether or not	you have filed a lawsu	t or made a demand for payment	elve property because
If you somed No ☐ Yes.  33. Claims Examp No ☐ Yes.  34. Other of No	are the beneficiary of a living one has died.  Give specific information  s against third parties, who ples: Accidents, employmen  Describe each claim	ether or not t disputes, in	you have filed a lawsui surance claims, or rights	t or made a demand for payment	
If you somed No ☐ Yes.  33. Claims Examp No ☐ Yes.  34. Other © No ☐ Yes.  35. Any fire No	are the beneficiary of a living one has died.  Give specific information  s against third parties, who poles: Accidents, employment  Describe each claim	ether or not t disputes, in ed claims of	you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	
If you some of	are the beneficiary of a living one has died.  Give specific information  s against third parties, who ples: Accidents, employment  Describe each claim  contingent and unliquidate  Describe each claim  mancial assets you did not  Give specific information  the dollar value of all of you	ether or not t disputes, in ed claims of already list	you have filed a lawsu surance claims, or rights every nature, includin om Part 4, including a	it or made a demand for payment to sue	

Official Form 106A/B Schedule A/B: Property page 5

■ No. Go to Part 6.□ Yes. Go to line 38.

37. Do you own or have any legal or equitable interest in any business-related property?

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Case number (if known) Document Debtor 1 Sheri R. Temple Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$95,519.00 Part 2: Total vehicles, line 5 \$11.675.00 57. Part 3: Total personal and household items, line 15 \$2,350.00 Part 4: Total financial assets, line 36 \$4,239.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$18,264.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$18,264.00

\$113,783.00

Fill in this infor	mation to identify your	casa:		
Fill III tills IIIIOI	mation to identity your	case.		
Debtor 1	Sheri R. Temple			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	y the Pro	perty Y	'ou Claim	as Exempt
---------	----------	-----------	---------	-----------	-----------

1. V	Which set of exc	emptions are you	claiming?	Check one only,	even if yo	our spouse is	filing with	you.
------	------------------	------------------	-----------	-----------------	------------	---------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
3906 212th PI Matteson, IL 60443 Cook County	\$95,519.00	-	\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2013 Chevrolet Malibu 60,000 miles Line from Schedule A/B: 3.1	\$11,675.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
Misc used household goods and furnishings, including: Sofa,	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Loveseat, TVCR, Coffee Table, End Tables, Dining Table/Chairs, Refrigerator/Freezer, Stove, Microwave, Washer/Dryer, Pots/Pans, Dishes/Flatware, 2 Bedroom Sets, 3 Lamps, Telephone, Lawnmower, Sn Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
3 Television, Computer, Printer, Video-Game System, and 2	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Smartphones Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

De	btor 1 Sheri R. Temple	Document		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim	Specific laws that allow exemption
		Schedule A/B	One	on only one box for each exemption.	
	Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$700.00		\$700.00	735 ILCS 5/12-1001(a)
				100% of fair market value, up to any applicable statutory limit	
	Various Costume Jewelry Line from Schedule A/B: 12.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Dog Line from Schedule A/B: 13.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	Zino nom osmodate / v Zino nom			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
	Ellie Holli Genedale AVB. 1911			100% of fair market value, up to any applicable statutory limit	
	Checking: United Credit Union Line from Schedule A/B: 17.1	\$1,600.00		\$1,600.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Savings: United Credit Union Line from Schedule A/B: 17.2	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
	Zino nom oshodate /v.Zi. v. iz			100% of fair market value, up to any applicable statutory limit	
	401(k): 401K Provided by Alliance Line from Schedule A/B: 21.1	\$1,304.00		100%	735 ILCS 5/12-1006
	Ellie Holli Osilodale 702. 2111			100% of fair market value, up to any applicable statutory limit	
	IRA: Roth with Alliance Line from Schedule A/B: 21.2	\$1,305.00		100%	735 ILCS 5/12-1006
				100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Policy through Employer - No Cash Surrender Value	\$0.00		\$0.00	215 ILCS 5/238
	Beneficiary: Delores Lang-Patton Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every Solution No  Yes. Did you acquire the property covered No  Yes	3 years after that for ca	ises fi	,	,

		Document	Page 18 d	of 67		
Fill in this inforn	nation to identify you	r case:				
Debtor 1	Sheri R. Temple	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS			
Case number						
(if known)						if this is an
			-		ameno	led filing
Official Form	n 106D					
Schedule	D: Creditors	Who Have Claims S	Secured	by Propert	y	12/15
		f two married people are filing togethe out, number the entries, and attach it to				
, ,	have claims secured by	your property?				
☐ No. Check	this box and submit th	nis form to the court with your other:	schedules. You	have nothing else to	o report on this form.	
Yes. Fill in	all of the information b	pelow.		-		
Part 1: List Al	II Secured Claims					
		nore than one secured claim, list the cred	ditor separately	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Gm Finan		Describe the property that secures the	he claim:	\$20,000.00	\$11,675.00	\$8,325.00
Creditor's Name	9	2013 Chevrolet Malibu 60,000				
Po Box 18 Arlington	31145 , TX 76096	As of the date you file, the claim is: capply.  Contingent	Check all that			
Number, Street	, City, State & Zip Code	Unliquidated				
Who owes the de	ht? Check one	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	oneok one.	☐ An agreement you made (such as m	nortgage or secur	ed		
Debtor 2 only		car loan)		-		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit				
Check if this cl community de		Other (including a right to offset)	Purchase Mo	oney Security Int	erest	
Date debt was inco	urred 2013	Last 4 digits of account numb				
2.2 Nationsta	r Mortgage LLC	Describe the property that secures the	he claim:	\$105,216.00	\$95,519.00	\$9,697.00
Creditor's Name		3906 212th PI Matteson, IL 60		Ψ100,210.00	Ψοσ,σ1σ.σσ	Ψ0,007.00
		Cook County				
8950 Cypi Blvd	ress Waters	As of the date you file, the claim is: 0	Check all that			
Coppell, 1	TX 75019	apply.  Contingent				
	, City, State & Zip Code	☐ Unliquidated				
Who owes the de	ebt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or secur	ed		
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cl	aim relates to a	Other (including a right to offset)	Mortgage			

community debt

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Debtor 1	Sheri R. T	emple			Case number (if know)	
	First Name	Middle Name	Last Name			
Date debt	was incurred	Opened 06/07 Last Active 12/30/16	Last 4 digits of account number	3798		
Add the	dollar value o	f your entries in Columi	n A on this page. Write that number h	iere:	\$125,216.0	00
	the last page		ollar value totals from all pages.		\$125,216.0	10

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Cast	C 17 07000 B	Document	Page	20 of 6	7	.01 D	300 141	all i	
	in this informa	tion to identify your c	ase:							
De	otor 1	Sheri R. Temple								
Dal	ntor 2	First Name	Middle Name	Last Nam	e					
	otor 2 ouse if, filing)	First Name	Middle Name	Last Nam	e					
Uni	ted States Bankı	ruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS						
		•								
	se number nown)						п	Check i	f this is a	an
`	,						Ц	amende		
_ ւ	Saial Carra	400F/F								
	ficial Form		no Have Unsecured	l Claim	•				12/1	E
			Part 1 for creditors with PRIORI			araditara with NON	DDIODITY -	laima Lis		
Scho Scho left. nam	edule G: Executor edule D: Creditors Attach the Contin e and case numb	ry Contracts and Unexpir s Who Have Claims Secu luation Page to this page	hat could result in a claim. Also ed Leases (Official Form 106G). red by Property. If more space is . If you have no information to re	Do not inclusion needed, co	ude any credi opy the Part y	itors with partially s ou need, fill it out, i	ecured clair number the	ms that ar entries in	re listed in the boxe	n es on the
		have priority unsecured								
••	□ No. Go to Part	• •	olamo agamot you.							
	Yes.									
2.	identify what type possible, list the classification Part 1. If more that	of claim it is. If a claim has laims in alphabetical order in one creditor holds a part	If a creditor has more than one pri both priority and nonpriority amou according to the creditor's name. I icular claim, list the other creditors e the instructions for this form in the	nts, list that of the first first that of the first fi	claim here and nore than two	d show both priority a	ind nonpriorit aims, fill out t	ty amounts the Contin	s. As much uation Pag	h as ge of
2.1	Internal P	evenue Serivce	Last 4 digits of accor	unt number	2888	\$1,100.00	amount	100.00	amount	\$0.00
2.1	Priority Credit		Last 4 digits of accor	unt number	2000	\$1,100.00	Ψ1,	100.00		<b>\$0.00</b>
	P.O. Box		When was the debt in	ncurred?	2014-15		=			
		hia, PA 19101-7346 et City State Zlp Code	As of the date you fil	e. the claim	is: Check all	that apply				
		he debt? Check one.	☐ Contingent	,						
	■ Debtor 1 only	/	☐ Unliquidated							
	☐ Debtor 2 only	,	☐ Disputed							
	☐ Debtor 1 and		Type of PRIORITY ur	nsecured cla	aim:					
		of the debtors and another	Domestic support of	obligations						
		s claim is for a communi	ty debt Taxes and certain	other debts	vou owe the a	overnment				
	Is the claim sub		☐ Claims for death or		, ,					
	■ No	•	Other. Specify							
	☐ Yes			ederal In	come Taxe	es				
Pai	rt 2: List All c	of Your NONPRIORITY	Unsecured Claims							
			red claims against you?							
٥.	_		rt. Submit this form to the court with	n vour other	schedules.					
	Yes.	5		y						
			and the shade of the state of t	ha and Pri	only a last to	ala alaima W		th		
4.	unsecured claim, I	list the creditor separately	ms in the alphabetical order of t for each claim. For each claim liste t the other creditors in Part 3.lf you	d, identify w	hat type of cla	im it is. Do not list cla	aims already	included in	n Part 1. If	f more

Total claim

Part 2.

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Case number (if know)

Debtor 1 Sheri R. Temple 4.1 \$576.00 Afni Last 4 digits of account number 0298 Nonpriority Creditor's Name Po Box 3427 When was the debt incurred? **Opened 12/14** Bloomington, IL 61702 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney At T Mobility ☐ Yes 4.2 **Capital One** Last 4 digits of account number 2211 \$184.00 Nonpriority Creditor's Name Attn: General Opened 12/16 Last Active Correspondence/Bankruptcv When was the debt incurred? 1/19/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.3 Check N Go Last 4 digits of account number \$1,237.00 Nonpriority Creditor's Name When was the debt incurred? 13213 Cicero Avenue Midlothian, IL 60445 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify

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Page 22 of 67 Case number (if know) Document Debtor 1 Sheri R. Temple 4.4 \$6,828.00 Dept Of Ed/582/neInet Last 4 digits of account number 0989 Nonpriority Creditor's Name Attn: Claims/Bankruptcy Opened 03/03 Last Active Po Box 82505 When was the debt incurred? 6/17/16 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational Dept Of Ed/582/nelnet 4.5 Last 4 digits of account number 1089 \$3,138.00 Nonpriority Creditor's Name Attn: Claims/Bankruptcy Opened 03/03 Last Active Po Box 82505 When was the debt incurred? 6/17/16 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts T Yes Other. Specify Educational 4.6 Falls Collection Svc, Inc Last 4 digits of account number 5606 \$62.00 Nonpriority Creditor's Name N114 W19225 Clinton Dr When was the debt incurred? Germantown, WI 53022 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No ☐ Yes ☐ Student loans

report as priority claims

■ Other. Specify Acl Inc

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debtor 1 Sheri R. Temple 4.7 \$3,269.00 **Harris & Harris** Last 4 digits of account number 3625 Nonpriority Creditor's Name 111 W Jackson Blvd When was the debt incurred? Suite 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Franciscan Health Olympia Fi ☐ Yes 4.8 **ICS** Last 4 digits of account number \$27.91 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? Tinley Park, IL 60477-9110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Medical or Dental services** ☐ Yes Other. Specify **MCSI - Municipal Collection** \$100.00 4.9 1339 Services, Inc Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7330 College Dr Suite 108 Palo Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 01 City Of Country Club Hills Pt ☐ Yes

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Debtor 1 Sheri R. Temple Case number (if know) 4.1 0 **Natan Scher** \$81.28 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? ADDRESSS\*\*\*\*\*\*\* Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical or Dental services** Other, Specify Phoenix Financial Services. Llc 2659 \$302.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/16 Last Active Po Box 361450 When was the debt incurred? 1/04/17 Indianapolis, IN 46236 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Sullivan Urgent Aid** Other. Specify Centers Lt ☐ Yes 4.1 **Phoenix Financial Services. Llc** 1718 \$272.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/16 Last Active Po Box 361450 When was the debt incurred? 1/04/17 Indianapolis, IN 46236 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Emp Of Cook County ☐ Yes Other. Specify LIC

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Debtor 1 Sheri R. Temple Case number (if know) 4.1 **Physicans Immediate Care** \$75.55 Last 4 digits of account number 3 Nonpriority Creditor's Name 600 W. Adams When was the debt incurred? Chicago, IL 60661 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical or Dental services ☐ Yes 4.1 6422 **Real Time Resolutions** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/07 Last Active Po Box 36655 When was the debt incurred? 1/28/13 Dallas, TX 75235 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice 4.1 Southland College Prep \$836.90 5 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? ADDRESSS\*\*\*\*\* Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Tuition

Debto	Sheri R. Temple	Case number (if know)	
4.1	Southland College Prep  Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	• •	When was the debt incurred?	
	ADDRESS********  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify School Feees	
4.1	State Collection Service	Last 4 digits of account number	\$2,765.31
	Nonpriority Creditor's Name P.O. Box 6250 Madison, WI 53701	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	
4.1	University of Chicago	Look deligite of account number	\$187.95
8	Nonpriority Creditor's Name	Last 4 digits of account number	ψ107.33
	PO Box 7230	When was the debt incurred?	
	Westchester, IL 60154  Number Street City State Zlp Code	As of the date year file the plains in Charles II that are h	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	

■ No □ Yes  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical or Dental services

Page 27 of 67 Case number (if know) Debtor 1 Sheri R. Temple 4.1 **University of Chicago Hospital** \$187.95 Last 4 digits of account number 9 Nonpriority Creditor's Name 1122 Paysphere Circle When was the debt incurred? Chicago, IL 60674 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical or Dental services 4.2 **University of Chicago Hospital** \$5,309.99 Last 4 digits of account number 0 Nonpriority Creditor's Name 8201 S CASS AVE When was the debt incurred? Darien, IL 60561 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical or Dental services ☐ Yes 4.2 **University of Chicago Hospital** \$140.65 Last 4 digits of account number Nonpriority Creditor's Name 5721 Maryland Ave. When was the debt incurred? Chicago, IL 60637 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical or Dental services ☐ Yes

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Debtor	1 Sheri R. Temple	——————————————————————————————————————	Case number (if know)	
4.2	Verizon	Last 4 digits of account number	0001	\$1,262.00
2	Nonpriority Creditor's Name Verizon Wireless Bankruptcy Administrati 500 Tecnolgy Dr Ste 500 Weldon Springs, MO 63304	When was the debt incurred?	Opened 07/13 Last Active 10/31/15	<b>,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No □ Yes	report as priority claims  Debts to pension or profit-sharin  Other. Specify	ng plans, and other similar debts	
4.2	Village of Matteson	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name 4900 Village Commons Matteson, IL 60443 Number Street City State Zlp Code	When was the debt incurred?	Or Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	<b>s.</b> Спеск ан тат арру	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Fines		
4.2	Village of Olympia Fields  Nonpriority Creditor's Name	Last 4 digits of account number		\$100.00
	20040 Governors Highway, Suite 2 Olympia Fields, IL 60461-1188	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	A state.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Governmen	ntal Fines	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Sheri R. Temple		Case number (if know)	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Diversified Consultants	Line <b>4.22</b> of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
PO Box 551268		Part 2: Creditors with Nonpriority Unsecured Claims	
Jacksonville, FL 32255	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Diversified Consultants, Inc.	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 571 Fort Mill, SC 29716		Part 2: Creditors with Nonpriority Unsecured Claims	
1 Of t Willi, 30 297 10	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
State Collection Service	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
2509 S. Stoughton Road Madison, WI 53716		Part 2: Creditors with Nonpriority Unsecured Claims	
madissii, iii seriis	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or		
University of Chicago	Line <b>4.20</b> of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
75 Remittance Dr, Ste 1385 Chicago, IL 60675		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or		
University of Chicago	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
15965 Collections Center Drive Chicago, IL 60693		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	· _	
University of Chicago Hospital	Line 4.19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
5841 S. Maryland Chicago, IL 60637		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	· •	
Village of Matteson 20500 South Cicero Avenue	Line 4.23 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Matteson, IL 60443		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				T	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,100.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,100.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	9,966.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,677.49
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,643.49

		DOGUITIE	ni Paue 30 01 07
Fill in this infor	mation to identify your	case:	
Debtor 1	Sheri R. Temple		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

		Docume	ent Page 31 d	of 67	
Fill in this i	information to identify your	case:			
Debtor 1	Sheri R. Temple				
DODIO! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	er				
(if known)	· -				☐ Check if this is an
					amended filing
Schedi Codebtors a Deople are f	filing together, both are equ	re also liable for any deb ally responsible for supp	lying correct informat	s complete and accurate as ion. If more space is needed o this page. On the top of an	, copy the Additional Page,
	and case number (if known)			oo pago. oo .op o. a	,
1. Do y	ou have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona  No. (	in the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	y? (Community property states ington, and Wisconsin.)	s <i>and territorie</i> s include
in line : Form 1 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official lumn 2. Column 1: Your codebtor	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	if your spouse is filing with sure you have listed the cred 6G). Use Schedule D, Sched	litor on Schedule D (Official
Na	ame, Number, Street, City, State and Zl	P Code		Check all schedules that	apply:
3.1				☐ Schedule D. line	
	lame			Schedule E/F, line	
				☐ Schedule G, line	
_	humban Otarat				
	lumber Street City	State	ZIP Code		
3.2	lama.			Schedule D, line	
N	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
N	lumber Street			_	
С	City	State	ZIP Code		

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Fill	in this information to identify your o	case:									
Del	otor 1 Sheri R. Ter	mple			_						
	otor 2 puse, if filing)				_						
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_						
O Se	fficial Form 1061  chedule I: Your Inc				Check if this is:  An amended filing  A supplement showing postpetition 13 income as of the following date:  MM / DD/ YYYY			) date:	2/15		
sup spo atta	use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment	i are married and not filii ur spouse is not filing w On the top of any additi	ng jointly, and your spith you, do not include	oouse i e inforn	s livi natio	ing with yon about y	ou, inclu your spo	ude inform use. If mo	nation a	about your ice is needed	d,
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse  ☐ Employed ☐ Not employed					
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed  Occupational Therapist								
	employers.	Occupation									
	Include part-time, seasonal, or self-employed work.	Employer's name	Healthpro Rehab	ilitaior	1						
	Occupation may include student or homemaker, if it applies.	Employer's address	634 Academy Dri Northbrook, IL 60								
		How long employed t	here? 2.5 Years	s			_				
Pai	t 2: Give Details About Mo	nthly Income									
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to rep	oort for a	any I	ine, write	\$0 in the	space. Inc	lude yo	our non-filing	
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all e	mplo	oyers for th	nat perso	n on the lir	nes belo	ow. If you nee	ed
						For Debt	or 1	For Dek			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,8	347.00	\$		N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$		N/A	

6,847.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	otor 1	Sheri R. Temple	-	C	Case	number (if known)				
					For	Debtor 1		Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.	-	\$_	6,847.00	\$		N/A	<u>.</u>
5.	List	all payroll deductions:								
٠.	5a.	Tax, Medicare, and Social Security deductions	5a	,	\$	1,514.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		<b>\$</b> -	68.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		<b>\$</b> _	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	i.	\$	71.00	\$		N/A	_
	5e.	Insurance	5e	€.	\$_	65.00	\$		N/A	<u></u>
	5f.	Domestic support obligations	5f.		\$_	0.00	\$		N/A	_
	5g.	Union dues	5g		\$_	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	0.00	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,718.00	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	5,129.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ì.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b	).	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>)</b> .	\$	302.50	\$		N/A	1
	8d.	Unemployment compensation	80	ı.	\$_	0.00	\$		N/A	<u></u>
	8e.	Social Security	86	€.	\$_	0.00	\$		N/A	\
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$_	0.00	\$		N/A	_
	8g.	Pension or retirement income	80	,	\$ •	0.00	—		N/A	_
	8h.	Other monthly income. Specify:	_ 01	ነ.+ 	\$	0.00	+ »		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	302.50	\$		N/	Α
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,431.50 + \$		N/A	= \$	5,431.50
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		<u> </u>		14/7		3,431.30
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			. •			e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	5,431.50
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi	ined Ily income
		No.								1

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Fill in t	his informat	ion to identify yo	our case:			1				
Debtor 1		Sheri R. Tem				Che	ck if this is:			
Debtor 2	2	<u> </u>	.p.o				An amended filing	uing poetpetition chapter		
	e, if filing)						13 expenses as of	wing postpetition chapter the following date:		
United S	States Bankru	uptcy Court for the	: NORTH	MM / DD / YYYY						
Case nu (If know										
Offic	cial Fo	rm 106J				•				
Sch	edule	J: Your	Exper	nses				12/15		
inform	nation. If mo		eded, atta	. If two married people and the control of the cont						
Part 1:		be Your House	hold							
	this a join No. Go to									
			in a separ	ate household?						
	□ No □ Ye		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.			
2. <b>D</b>	o you have	dependents?	□ No							
	o not list De ebtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	o not state t						4=	□ No		
de	ependents r	names.			Son			■ Yes □ No		
								☐ Yes		
								□ No		
								☐ Yes		
								□ No □ Yes		
		enses include people other t	han _	No			_	□ Tes		
yo	ourself and	l your depende	nts? □	Yes						
expens	ate your ex		our bankr	ly Expenses uptcy filing date unless y ry is filed. If this is a supp						
the val		assistance an		government assistance is cluded it on Schedule I:			Your exp	enses		
(Onicia	ai i Oilli io	01.)								
		r home owners d any rent for th		nses for your residence. I or lot.	nclude first mortgag	e 4. \$	<b>.</b>	1,039.00		
If	not include	ed in line 4:								
48		state taxes				4a. \$		0.00		
4k		ty, homeowner's				4b. \$	·	0.00		
40 40		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$	·	120.00 0.00		
				<b>our residence.</b> such as ho	me equity loans	5. S		0.00		

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Debtor 1 S	heri R. Temple	Case num	ber (if known)	
6. Utilities	:			
6a. E	lectricity, heat, natural gas	6a.	\$	320.00
6b. W	/ater, sewer, garbage collection	6b.	\$	150.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. O	ther. Specify: Bundle Service: Cable, Internet, and Home Phone	6d.	\$	228.00
С	ell Phones		\$	134.00
. Food ar	nd housekeeping supplies	7.	\$	450.00
. Childca	re and children's education costs	8.	\$	0.00
. Clothin	g, laundry, and dry cleaning	9.	\$	220.00
0. Persona	al care products and services	10.	\$	180.00
1. Medical	and dental expenses	11.	\$	100.00
	ortation. Include gas, maintenance, bus or train fare.	40	Φ.	300.00
	nclude car payments.	12.	· -	
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	ble contributions and religious donations	14.	\$	0.00
<ol><li>Insuran</li></ol>	ce. nclude insurance deducted from your pay or included in lines 4 or 20.			
	fe insurance	15a.	\$	0.00
	ealth insurance	15b.	·	0.00
	ehicle insurance	15c.	\$	108.00
	ther insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Specify:		16.	\$	0.00
	nent or lease payments:			
17a. C	ar payments for Vehicle 1	17a.	\$	0.00
	ar payments for Vehicle 2	17b.	\$	0.00
	ther. Specify:	17c.	\$	0.00
	ther. Specify:	17d.	\$	0.00
	nyments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I). ayments you make to support others who do not live with you.	10.	\$	
Specify:	• • • • • • • • • • • • • • • • • • • •	19.	Ψ	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Sche		our Income	
	lortgages on other property	20a.		0.00
	eal estate taxes	20b.	· ·	0.00
20c. P	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
	laintenance, repair, and upkeep expenses	20d.	\$	0.00
	omeowner's association or condominium dues	20e.	\$	0.00
1. Other: 8	Specify: Auto Repairs/Maintenance	21.	+\$	100.00
Postac	pe/Bank Fees		+\$	60.00
Pet Ca			+\$	30.00
	Lunches		+\$	60.00
	te your monthly expenses		•	2 640 00
	d lines 4 through 21.		\$	3,649.00
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	3,649.00
3. Calcula	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,431.50
	opy your monthly expenses from line 22c above.	23b.	-\$	3,649.00
				,
	ubtract your monthly expenses from your monthly income.	00	•	1,782.50
TI	he result is your <i>monthly net income</i> .	23c.	Ψ	1,702.50

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor will stop receiving child support payments in 6/2017 due to dependent son's turning of majority age.

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Fill in this info	ormation to identify your	case:			
Debtor 1	Sheri R. Temple				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
If two married You must file t obtaining mor		r, both are equally respor le bankruptcy schedules n connection with a bank	nsible for supplying co	orrect information. es. Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
s	ign Below				
Did you	pay or agree to pay some	one who is NOT an attori	ney to help you fill out	t bankruptcy forms?	
■ No					
☐ Yes	. Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumr	mary and schedules fi	iled with this declaration	on and
X /s/S	heri R. Temple		X		
Sher	i R. Temple ture of Debtor 1		Signature	of Debtor 2	

Date \_\_\_\_\_

Date **February 28, 2017** 

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Fill in	this inform	ation to identify you	r case:			
Debto		Sheri R. Temple				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name		
l Inite	d States Ran	kruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Onnec	d Claics Dan	truptey Court for the.	HORTHERN BIOTHOT	or reenvoice		
Case (if know	number				_	theck if this is an mended filing
Offi	cial For	m 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inform	nation. If mo	re space is needed, . Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1. W		current marital statu				
	<ul><li>Married</li><li>Not marri</li></ul>	ed				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	ı.	
[	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No ] Yes. Mak	e sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2		the Sources of You	`	,		
I all 2	Lxpiaii	the Sources of Tou	i ilicollie			
F	ill in the total	amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part re together, list it only once ur		ndar years?
	] No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,858.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Document

Debtor 1 Sheri R. Temple

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December	31, 2016 )	■ Wages, commissions, bonuses, tips	\$83,804.00	☐ Wages, commission bonuses, tips	ons,
				☐ Operating a business		☐ Operating a busine	ess
		dar year be December		■ Wages, commissions, bonuses, tips	\$78,893.00	☐ Wages, commission bonuses, tips	ons,
				☐ Operating a business		☐ Operating a busine	ess
	and other winnings.  List each s	public bene If you are fil	fit payments; ing a joint ca the gross inc	her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa	rest; dividends; money collec you received together, list it o	ed from lawsuits; royalti nly once under Debtor 1	ies; and gambling and lottery
				Dobton 4		Dobtos 2	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
		/ 1 of curre filed for bai	nt year until nkruptcy:	Retirement Income	\$0.00		
	r last calen nuary 1 to	dar year: December	31, 2016 )	Retirement Income	\$0.00		
		dar year be December		Retirement Income	\$34,082.00		
Pa	rt 3: List	: Certain Pa	ıvments You	ı Made Before You Filed for	Bankruptcv		
6.		Debtor 1's	or Debtor 2	2's debts primarily consumer Debtor 2 has primarily consumeration personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C	C. § 101(8) as "incurred by an
			•	ore you filed for bankruptcy, di	id you pay any creditor a tota	of \$6,425* or more?	
		□ No.	Go to line	•			
		□ Yes	paid that co	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for t	nts for domestic support oblig his bankruptcy case.	ations, such as child sup	pport and alimony. Also, do
	_			nt on 4/01/19 and every 3 year		or after the date of adjus	stment.
	■ Yes.			or both have primarily consumore you filed for bankruptcy, di		of \$600 or more?	
		■ No.	Go to line	7.			
		☐ Yes	include pay	each creditor to whom you pai yments for domestic support o r this bankruptcy case.			
	Creditor'	s Name an	d Address	Dates of navme	ent Total amount	Amount you Was	s this navment for

paid

still owe

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Case number (if known) Debtor 1 Sheri R. Temple

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	iny property on a	eccount of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.	cases, small claims action	s, divorces, collectio		actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ie case
	Within 1 year before you filed for bankruptocheck all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  Within 90 days before you filed for bankrup accounts or refuse to make a payment became	Describe the Property Explain what happened	d	Date		Value of the property
	No					
	Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was า	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

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Page 40 of 67 Case number (if known) Document Debtor 1 Sheri R. Temple 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Amount of Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Ledford, Wu & Borges, LLC \$0.00 paid prior to case filing; \$4,310.00 \$0.00 105 W. Madison to be paid by through the Chapter 13 23rd Floor Plan (\$4,000.00 for legal fees and Chicago, IL 60602 \$310.00 for court filing fee. notice@billbusters.com **CIN Legal Data Services** \$60.00 for merged, multi-bureau credit 02/2017 \$60.00 4540 Honeywell Ct report, credit counseling and debtor Dayton, OH 45424 education courses. 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

**Person Who Was Paid Address** 

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Sheri R. Temple

8.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No  Yes. Fill in the details.	usiness or financial affa ide as security (such as t	nirs? he granting of a s		
	Person Who Received Transfer Address	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro		y property to a s	self-settled trust or similar devi	ce of which you are a
	Yes. Fill in the details.				
	Name of trust	Description and v	alue of the prop	erty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments. Safe Deposit	Boxes, and Sto	rage Units	
			•		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	•		•	•
	houses, pension funds, cooperatives, assoc	iations, and other finar	icial institutions	•	_
	No				
	Yes. Fill in the details.		_		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourtinstrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any	y safe deposit box or other dep	ository for securities,
	■ No				
	☐ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1 y	ear before you filed for bankru	ptcy?
	■ No				
	Yes. Fill in the details.				
	Name of Storage Facility	Who else has or h	nad access	Describe the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)	treet, City,		have it?
Par	t 9: Identify Property You Hold or Control	for Someone Fise			
	Do you hold or control any property that sor for someone.		ude any property	you borrowed from, are storin	g for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	t 10: Give Details About Environmental Info	rmation			
or	the purpose of Part 10, the following definition	ons apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Sheri R. Temple

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	hazardous material, pollutant, contaminant, or similar term.				
Rep	oort all notices, releases, and proceedings that y	ou know about, regardless of wher	n the	y occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e und	ler or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	istrative proceeding under any envi	rironn	nental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Pai	rt 11: Give Details About Your Business or Cor	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	ny of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	er full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	nip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	itive of a corporation			
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation	ı		
	No. None of the above applies. Go to Part	t 12.			
	Yes. Check all that apply above and fill in		s.		
		escribe the nature of the business			
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper		Do not include Social Security in Dates business existed	number or IIIN.
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement t	to an	nyone about your business? Inclu	de all financial
	■ No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued			

Part 12: Sign Below

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Debtor 1 Sheri R. Temple

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheri R. Temple Signature of Debtor 2 Sheri R. Temple Signature of Debtor 1

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Date February 28, 2017

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$60.00 for expenses, leaving a balance due for the filing fee of \$310.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: <b>February 28, 2017</b>		
Signed:		
/s/ Sheri R. Temple	/s/ Andrew C. Marzan ARDC	
Sheri R. Temple	Andrew C. Marzan ARDC #6316313	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amo	ounts are blank.	

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

In re	Sheri R. Temple		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	CBTOR(S)
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), ompensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of the debtor(s).	of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	4,000.00
2. \$	310.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. <b>I</b>	I have not agreed to share the above-disclosed compens	sation with any other person	n unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
6. I	n return for the above-disclosed fee, I have agreed to rende	er legal service for all aspe	cts of the bankruptcy c	ase, including:
b. c.	Analysis of the debtor's financial situation, and renderin Preparation and filing of any petition, schedules, statemer Representation of the debtor at the meeting of creditors [Other provisions as needed]  Exemption planning; preparation and filing and filing of motions pursuant to 11 USC 5	ent of affairs and plan which and confirmation hearing, and g of reaffirmation agree	ch may be required; and any adjourned hea ements and applicate	rings thereof;
7. B	y agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch			/ proceeding.
		CERTIFICATION		
	certify that the foregoing is a complete statement of any againkruptcy proceeding.	greement or arrangement for	or payment to me for re	epresentation of the debtor(s) in
Fe	bruary 28, 2017	/s/ Andrew C. M	arzan ARDC	
Da		Signature of Attorn Ledford, Wu & E 105 W. Madison 23rd Floor Chicago, IL 606	3orges, LLC 02 Fax: 312-873-4693	

Case 17-07683 Doc 1 Filed 03/13/17 Entered 03/13/17 10:44:51 Desc Main

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# LEDFORD, WU & BORGES, LLC.

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

FOR OFFICE USE (13)	٠.
Client No. Zo )	
Responsible attorney: A Cir	
CARA signed? N N	

### ATTORNEY RETENTION CONTRACT

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.
2. Services: Client retains Attorney for the following services:   Chapter 13 bankruptcy (debt adjustment)
<ul> <li>3. Scope of Representation:</li> <li>(a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1) adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify):</li></ul>
Legal fee: \$
Additional legal fees may apply if the parties have entered into a Court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement post-filing or other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee.
5. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial):    V
may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.
<ul> <li>6. Client's Daties. Client agrees, during the course of representation, to:</li> <li>(a) provide Attorney with full, accurate and timely information, financial and otherwise;</li> <li>(b) Ioliow Attorney's procedures and cooperate with Attorney in providing requested documents and information;</li> <li>(c) promptly inform Attorney of any change of address, phone number, c-mail address or employment, or activation of military duty;</li> <li>(d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title toan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and</li> <li>(e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce deerce, life insurance proceeds, or a monetary judgment, award or settlement.</li> </ul>

7. Co-counsel. Client understands that more than one attorney may work on this ease. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this ease, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.

8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

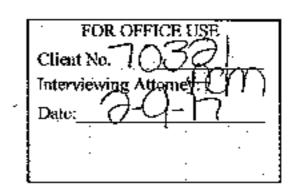
to the second of the second	and the state of the sequentions are forth hereit.
x remole -x_	Date: 2/9/2017
Attorney Signature: ARDC #	

# BILLBUSTERS

Ledford, Wu and Borges, LLC

Attorneys of Low 4105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

## CONSULTATION AGREEMENT



### THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Daties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
  - a. analyzing Client's financial circumstances based on information provided by Client;

a.	analyzing Chent's financial circumstances based on information provided by Chent;					
ъ.	to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;					
c.	<ul> <li>e. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client options, informing Client what additional information Client needs to provide in order to enable Attorney provide such advice and information;</li> </ul>					
d.	where applicable, advising Client of the requirements placed upon Client to file a hankruptcy; and					
e.	to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client					
5. Fees (cl	neck one):					
/ rel	consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client ationship shall terminate at the conclusion of the interview					
Ci	ient agrees to pay \$ in nonrefundable consultation fee					
In the even the case, <b>a</b>	t Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for nd a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation					
	es' obligations and a breakdown of the costs.					
Client is the	viedgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and mandated by Section 527(b) of the Bankruptcy Code.					
x	heri Denylo x Date: 2 19 ,17					
Attornay S	ionatura: APINCIII 63/636					

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

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### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- Propare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the ease.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not carned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$\sum\_{\text{eff}}\text{\text{\$\psi}}\$
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 2000 o
- 3. Before signing this agreement, the attorney has received, \$ 60 toward the flat fee, leaving a balance due of \$ 4000 : and \$ 60 for expenses, leaving a balance due for the filing fee of \$ 4000 -

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 2/9/9 at

Signed:

Debtor(s)

ttorney for the Debto:

Do not sign this agreement if the amounts are blank.

### United States Bankruptcy Court Northern District of Illinois

In re	Sheri R. Temple		Case No.			
		Debtor(s)	Chapter	_13		
	VERIFICATION OF CREDITOR MATRIX					
		Number of Cre	editors:	34		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	is true and	correct to the best of my		
Date:	February 28, 2017	/s/ Sheri R. Temple Sheri R. Temple Signature of Debtor				

Afni Po Box 3427 Bloomington, IL 61702

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Check N Go 13213 Cicero Avenue Midlothian, IL 60445

Dept Of Ed/582/nelnet Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

Dept Of Ed/582/nelnet Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

Diversified Consultants PO Box 551268 Jacksonville, FL 32255

Diversified Consultants, Inc. P.O. Box 571 Fort Mill, SC 29716

Falls Collection Svc, Inc N114 W19225 Clinton Dr Germantown, WI 53022

Gm Financial Po Box 181145 Arlington, TX 76096

Harris & Harris 111 W Jackson Blvd Suite 400 Chicago, IL 60604 ICS PO Box 1010 Tinley Park, IL 60477-9110

Internal Revenue Serivce P.O. Box 7346 Philadelphia, PA 19101-7346

MCSI -Municipal Collection Services, Inc 7330 College Dr Suite 108 Palo Heights, IL 60463

Natan Scher ADDRESSS\*\*\*\*\*\*\*

Nationstar Mortgage LLC 8950 Cypress Waters Blvd Coppell, TX 75019

Phoenix Financial Services. Llc Po Box 361450 Indianapolis, IN 46236

Phoenix Financial Services. Llc Po Box 361450 Indianapolis, IN 46236

Physicans Immediate Care 600 W. Adams Chicago, IL 60661

Real Time Resolutions Attn: Bankruptcy Po Box 36655 Dallas, TX 75235

Southland College Prep ADDRESSS\*\*\*\*\*

Southland College Prep ADDRESS\*\*\*\*\*\*\*\*

State Collection Service P.O. Box 6250 Madison, WI 53701

State Collection Service 2509 S. Stoughton Road Madison, WI 53716

University of Chicago PO Box 7230 Westchester, IL 60154

University of Chicago 75 Remittance Dr, Ste 1385 Chicago, IL 60675

University of Chicago 15965 Collections Center Drive Chicago, IL 60693

University of Chicago Hospital 1122 Paysphere Circle Chicago, IL 60674

University of Chicago Hospital 8201 S CASS AVE Darien, IL 60561

University of Chicago Hospital 5721 Maryland Ave. Chicago, IL 60637

University of Chicago Hospital 5841 S. Maryland Chicago, IL 60637

Verizon Verizon Wireless Bankruptcy Administrati 500 Tecnolgy Dr Ste 500 Weldon Springs, MO 63304

Village of Matteson 4900 Village Commons Matteson, IL 60443

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Village of Matteson 20500 South Cicero Avenue Matteson, IL 60443

Village of Olympia Fields 20040 Governors Highway, Suite 2 Olympia Fields, IL 60461-1188